OMB Number:	
Approval Expiry Date:	

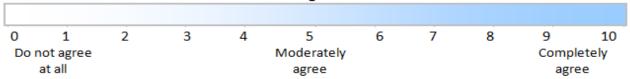
U.S. Institute for Environmental Conflict Resolution ECCR Services Participant Questionnaire [Project/Process Name]

The U.S. Institute for Environmental Conflict Resolution (U.S. Institute) evaluates all of its services. As a part of this evaluation we ask participants in our ECR processes to provide us with information about their experience. Your responses will be used to improve our programs and services. The average estimated reporting burden for this questionnaire is 12 minutes. This estimate includes time for reviewing the instructions, gathering the data needed, completing, and reviewing the questionnaire. You can send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Institute. The Institute will not report information from this evaluation in a way that respondents or their organizations can be identified. Moreover, the identity of individual respondents will be kept confidential and will not be disclosed. The Office of Management and Budget (OMB) number that is displayed on the cover is currently valid and authorizes this collection of information.

Ple	ase indicate what type of ECCR process you participated in:
	Consultation and/or Situation Assessment Facilitated/Mediated Process Facilitated Meeting/Workshop
1.	What prompted the request for ECCR services from the U.S. Institute? Click here to enter text.
2.	Briefly describe the services the U.S Institute provided. Click here to enter text.

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3. Using the scale above, please rate the extent to which you agree with the following statement:

Rating	
	The U.S. Institute's services (including the contractor services, if applicable) helped us determine how best to proceed to resolve this issue/conflict.

4. Using the scale above, please rate the extent to which you agree with the following statements about the Consultation and/or Situation Assessment services provided by the U.S. Institute (including the contractor services, if applicable).

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	Key issues were explored
	Key issues were considered in the recommendations on how to proceed
	Input was sought from key parties to the issue/conflict
	I would use a situation assessment again for similar situations

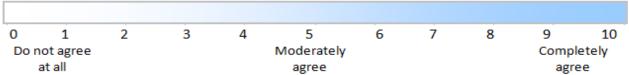
5. For <u>Facilitation Services or Facilitated Meetings/Workshops</u>, please indicate the extent to which you feel progress was made:

Check only one

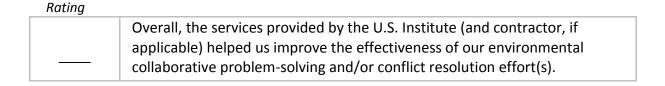
Progress made on <u>all</u> key issues	Use the space below to elaborate on your response:
Progress made on <u>most</u> key issues	
Progress made on <u>some</u> key issues	
We ended the process without making much progress at all	

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6. Using the rating scale above, please rate the extent to which you agree that:



7. Please use the space below for any additional comments you would like to make.

Click here to enter text.

Thank you for taking the time to complete this questionnaire. Your assistance in providing this information is **very** much appreciated.

PERSONS WITH DISABILITIES WHO REQUIRE ALTERNATIVE MEANS FOR COMMUNICATION OF PROGRAM EVALUATION INFORMATION SHOULD CONTACT THE U.S. INSTITUTE AT (520) 901-8532